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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete If Known	
FEES TRANSMITTAL <i>MAY 07 2007</i>		Application Number	10/810,541
		Filing Date	March 26, 2004
		First Named Inventor	Sayaka KAWASHIMA
		Examiner Name	Dawn L. Garrett
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1774
TOTAL AMOUNT OF PAYMENT (\$1,700.00)		Attorney Docket No. TJK/460	

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 19-1351 Deposit Account Name: Seyfarth Shaw LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEES CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>			<u>Fees Paid (\$)</u>	<u>Small Entity</u>	
	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>		<u>Fee (\$)</u>	<u>Fee (\$)</u>
- 20 or HP =	_____	_____	_____	= _____	50	25

HP = highest number of total claims paid for, if greater than 20

<u>Indep. Claims</u>	<u>Extra Claims</u>			<u>Fees Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>		<u>Fee (\$)</u>	<u>Fee (\$)</u>
- 3 or HP =	_____	_____	_____	= _____	_____	_____

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>		<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Fee (\$)</u>			
- 100 =	_____	/50 =	_____ (round up to a whole number)	x _____	= _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Issue Fee & Publication Fee

1,700.00

SUBMITTED BY

Signature		Registration No. 35,567 (Attorney/Agent)	Telephone 312-460-5000
Name (Print/Type)	Timothy J. Keefer		Date May 2, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)
Sayaka KAWASHIMA)
Application No.: 10/810,541) GAS BARRIER SUBSTRATE
Filing Date: March 26, 2004)
Customer No. 27,717)

TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Mail Stop: Issue Fee

Dear Sir:

Please find enclosed the following in the above-captioned patent application:

1. Fee Transmittal
2. Part B – Fee(s) Transmittal in duplicate;
3. A check in the amount of \$1,700.00 in payment of the issue fee and publication fee;

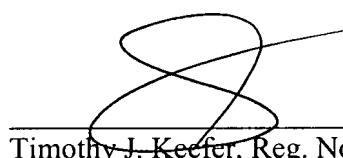
and

4. Certificate of Mailing and Postcard.

Please charge any additional fees to Deposit Account No. 19-1351. A duplicate of this transmittal is enclosed.

Please acknowledge receipt of the above by returning the enclosed self-addressed, stamped postcard.

Respectfully Submitted,



Timothy J. Keefer, Reg. No. 35,567

Date: May 2, 2007

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